

County: Walworth
FAIRHAVEN CORPORATION
435 STARIN ROAD

Facility ID: 3310

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WHITEWATER 53190 Phone:(262) 473-2140
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/02): 83
Total Licensed Bed Capacity (12/31/02): 84
Number of Residents on 12/31/02: 82

Ownership: Non-Profit Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? Yes
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 81

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		
Home Health Care	No					1 - 4 Years		28.0
Supp. Home Care-Personal Care	Yes					More Than 4 Years		53.7
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.2			18.3
Day Services	No	Mental Illness (Org./Psy)	19.5	65 - 74	3.7			-----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	18.3			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	1.2	85 - 94	53.7	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.2	95 & Over	23.2	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	1.2		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	22.0	65 & Over	98.8	-----		
Transportation	Yes	Cerebrovascular	18.3		-----	RNs		8.5
Referral Service	No	Diabetes	4.9	Sex	%	LPNs		8.2
Other Services	No	Respiratory	0.0	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	31.7	Male	14.6	Aides, & Orderlies		
Mentally Ill	No		-----	Female	85.4	50.4		
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
Level of Care			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0			0	0.0	0	0	0.0	0	1	3.0	193	0	0.0	0	0	0.0	0	1	1.2
Skilled Care	4	100.0	348			40	88.9	111	0	0.0	0	29	87.9	169	0	0.0	0	0	0.0	0	73	89.0
Intermediate	---	---	---			5	11.1	92	0	0.0	0	3	9.1	159	0	0.0	0	0	0.0	0	8	9.8
Limited Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0				45	100.0		0	0.0		33	100.0		0	0.0		0	0.0		82	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02							

Percent Admissions from:		Activities of		% Needing		% Totally		Total	
		Daily Living (ADL)		Assistance of		Dependent		Number of	
Private Home/No Home Health		0.0		Independent		One Or Two Staff		Residents	
Private Home/With Home Health		24.5		1.2		80.5		82	
Other Nursing Homes		0.0		8.5		72.0		19.5	
Acute Care Hospitals		64.9		17.1		63.4		19.5	
Psych. Hosp.-MR/DD Facilities		0.0		18.3		59.8		22.0	
Rehabilitation Hospitals		0.0		54.9		29.3		15.9	
Other Locations		10.6						82	
Total Number of Admissions		94		Continence		% Special Treatments			
Percent Discharges To:				Indwelling Or External Catheter		4.9		Receiving Respiratory Care	
Private Home/No Home Health		0.0		Occ/Freq. Incontinent of Bladder		57.3		Receiving Tracheostomy Care	
Private Home/With Home Health		33.3		Occ/Freq. Incontinent of Bowel		13.4		Receiving Suctioning	
Other Nursing Homes		0.0						Receiving Ostomy Care	
Acute Care Hospitals		29.0		Mobility				Receiving Tube Feeding	
Psych. Hosp.-MR/DD Facilities		0.0		Physically Restrained		0.0		Receiving Mechanically Altered Diets	
Rehabilitation Hospitals		0.0							
Other Locations		8.6		Skin Care				Other Resident Characteristics	
Deaths		29.0		With Pressure Sores		3.7		Have Advance Directives	
Total Number of Discharges				With Rashes		3.7		Medications	
(Including Deaths)		93						Receiving Psychoactive Drugs	
								50.0	

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities									

		This Facility		Ownership:		Bed Size:		Licensure:	
				Nonprofit		50-99		Skilled	
				Peer Group		Peer Group		Peer Group	
				Ratio		Ratio		Ratio	
								All Facilities	
Occupancy Rate: Average Daily Census/Licensed Beds		96.4		92.2		1.05		88.5	
Current Residents from In-County		61.0		76.0		0.80		72.5	
Admissions from In-County, Still Residing		20.2		25.2		0.80		19.5	
Admissions/Average Daily Census		116.0		95.0		1.22		125.4	
Discharges/Average Daily Census		114.8		97.5		1.18		127.2	
Discharges To Private Residence/Average Daily Census		38.3		38.4		1.00		50.7	
Residents Receiving Skilled Care		90.2		94.3		0.96		92.9	
Residents Aged 65 and Older		98.8		97.3		1.02		94.8	
Title 19 (Medicaid) Funded Residents		54.9		63.8		0.86		66.8	
Private Pay Funded Residents		40.2		28.5		1.41		22.7	
Developmentally Disabled Residents		0.0		0.3		0.00		0.6	
Mentally Ill Residents		19.5		37.9		0.51		36.5	
General Medical Service Residents		31.7		23.0		1.38		21.6	
Impaired ADL (Mean)		49.8		49.9		1.00		48.0	
Psychological Problems		50.0		52.6		0.95		59.4	
Nursing Care Required (Mean)		6.1		6.3		0.97		6.3	
								0.97	